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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

FILE NO.
44447368
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	2		2			
4	2		2			
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23			1			
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TOTAL IND.	1	1	1	1		
TOTAL DEP.	1	1	1	1		
TOTAL CLAIMS	12	12	12	12		

TOTAL IND.	1	1	1
TOTAL DEP.	1	1	1
TOTAL CLAIMS	12	12	12

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS U.S. DEPARTMENT OF COMMERCE
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